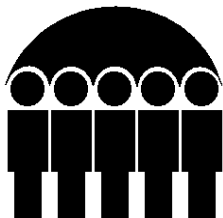May 6, 2003

SERVING QUALIFIED CUSTOMERS APPENDIX

Iowa
Department
of
Human Services

Page

470-0188, Application for Nonassistance Support Services

Purpose   This application allows a person not currently receiving public assistance or services from the Unit to apply for child support services.

Supply   Print form 470-0188 from the on-line manual or photocopy the sample from the paper manual.

Completion   The Unit staff complete the "office use" section and the applicant completes the remainder of the form. Form 470-0188 is a required form.

Distribution   Mail a copy of the application, along with form 470-3414, *Court Order Request Letter*, to the applicant.

Data   Before mailing the form, complete the following fields on page 1 of the application:

 ♦ Issuing Office:

 ♦ DATE REQUESTED:

 ♦ DATE GIVEN OR SENT:

 ♦ TO:

470-1981, Request to Stop Support Services

Purpose	Form 470-1981 is sent to FIP and Medicaid recipients when we receive notice they are no longer on assistance. The form:

♦ Advises them of the availability of non-assistance services.

♦ Advises the payee that enforcement continues if support is due the state.

♦ Includes an insert providing information on the services available and fees for those services.

Supply	This form is batch-generated.
Completion	ICAR generates this form when ICAR receives notice through the automated interface that a payee no longer receives assistance from FIP or from Medicaid.
Distribution	This self-mailer and insert are sent to the payee.
Data	ICAR enters all of the information on the form.

♦ Name and address of the payee
♦ Issuing office
♦ Date assistance ends
♦ Name of the payor
♦ Case number

470-2547, Notice of Application for IV-D Services

Purpose	Form 470-2547 is used to notify the clerk of court that a party has applied to the Unit for non-IV-D enforcement services.
Supply	The form is available from FORMVIEW.
Distribution	Mail one copy to the clerk of court. File one copy in the case record.
Data	Enter information into the following fields to complete the form:

- ♦ Petitioner's Name
- ♦ Respondent's Name
- ♦ Court Order number
- ♦ CSC case number
- ♦ Today's date
- ♦ Your name, the Unit address and telephone number

470-3399, NPA Application Tracking Log

Purpose   Form 470-3399 is used to keep track of all requests received for non-
                       public assistance application, whether a completed application is
                       returned or not.

Supply   Logs for all offices are stored in the DHS network. Access the *NPA
                       Application Tracking Log* for your office using the following path:
                       hoovr3s2\csru.772\npa-apps\(office.name)(npalog.doc)

Completion   The Unit, FCRU or CSC staff who receive a request for the NPA
                       application fill out the form. Complete one row for each application
                       that is requested.

Data   Insert the location of the Unit office (or FCRU or CSC) and complete
                       the columns as follows:

                       ♦ Name of Applicant: The name of the person who made the
                         request. If the request was made on behalf of another person,
                         include that person's name in the address column.

                       ♦ Mailing Address of Applicant: The actual mailing address that the
                         application was sent. If the application was obtained in person,
                         then write "in person" for the address. Use the date the application
                         was handed out as the date requested and put N/A for the date sent.

                       ♦ Date Application Requested: The actual date that the request for
                         the NPA application was made, in MM/DD/CCYY format. Put the
                         same date in this section as that on page 1 of form 470-0188,
                         Application for Nonassistance Support Services. If an ICAR case
                         is opened, put the same date in the npa app request field as is on
                         the CASE screen

                       ♦ Date Application Sent: The actual date that the application was
                         mailed (except when picked up in person as noted above) in
                         MM/DD/CCYY format. Put the same date in this section as that
                         on page 1 of form 470-0188, *Application for Nonassistance
                         Support Services*. If an ICAR case is opened, put the same date in
                         NPA APP SENT field on the CASE screen.

                       ♦ Date Signed Application Received: The actual date that the signed
                         application was received in the office.

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470-3400, Notice of Possible Sanction: Noncooperation with the Child Support Program

Purpose: Form 470-3400 is used to inform the recipient that the Unit has determined that the payee has not cooperated in the process and that the Unit is unable to take the next step in the child support case.

Completion   The form is automatically from the FORMVIEW module displayed after the Unit worker places an "R" in the NONCOOPERATION field of the PAYEE screen.

Data   To generate this form you must enter the following information:

- ♦ The name and address of the custodial parent

- ♦ Today's date

- ♦ The Unit case number

- ♦ Your Unit office address

- ♦ The reason why the custodial parent is receiving the *Notice of Possible Sanction: Noncooperation with the Child Support Program.* Place an "X" in front of any of the standard reasons listed or type in your own specific reason.

- ♦ Your name, phone number and office address

470-3485, Incomplete Non-Assistance Support Application

Purpose	Form 470-3485 is a letter informing the non-public assistance (NPA) applicant of missing information on a recently submitted application for child support service.
Supply	This form is available on-line. Generate this form by accessing it through FORMLIST screen using the CASE process code.
Completion	This form is not a required form. However, you should complete the form and send it to the applicant if the NPA application is not completed correctly.
Distribution	Mail a copy of the letter along with the application and all attachments back to the applicant.
Data	To complete this form enter the following information:

- ♦ The applicant's name and address

- ♦ The Unit address where corrected application may be returned

470-3514, Court Order Request Letter

Purpose	Form 470-3514 is a form letter advising the non-public assistance applicant of information and documentation the Unit needs in order to proceed with child support services.
Supply	This form is available on-line. Generate this form by accessing it through FORMLIST screen using the CASE process code.
Completion	This form is a required form.
Distribution	Mail this letter to the applicant along with form 470-0188, *Application for Nonassistance Support Services*. The applicant is responsible for forwarding the form to the appropriate clerk of court.
Data	To complete this form enter the following information:

- ♦ Applicant's name and address

- ♦ The Unit address where corrected application may be returned

470-3975, Information Regarding Automatic Deposit of Child Support Payments

Purpose
: Form 470-3975 is a form letter advising non-public assistance applicants of information and documentation the Unit needs in order to deposit support payments into a financial institution account of the custodial parent's choice. This form explains the advantages of using direct deposit.

Supply
: This form is available on-line. Generate this form by accessing it through FORMLIST screen using the CASE process code.

Completion
: This form is a required form. The applicant is responsible for completing and returning the form to the Unit with the completed application if they wish to use direct deposit.

Distribution
: Mail this letter to the applicant along with form 470-0188, *Application for Nonassistance Support Services*.

Data
: There is no information to complete to generate this form.

STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

May 6, 2003

GENERAL LETTER NO. 9-H-AP-1

ISSUED BY: Bureau of Collections,
Division of Child Support, Case Management and Refugee Services

SUBJECT: Employees' Manual, Title 9, Chapter H, *SERVING QUALIFIED CUSTOMER APPENDIX*, Title page, new; Contents (page 1), new; and pages 1 through 8, new; and the following forms

470-0188	*Application for Nonassistance Support Services*, revised
470-1981	*Request to Stop Support Services*, revised
470-2547	*Notice of Application for IV-D Services*, new
470-3399	*NPA Application Tracking Log*, revised
470-3400	*Notice of Possible Sanction: Noncooperation with the Child Support Program*, new
470-3485	*Incomplete Non-Assistance Support Application*, revised
470-3514	*Court Order Request Letter*, revised
470-3975	*Information Regarding Automatic Deposit of Child Support Payments*, new

Summary

This appendix includes system-generated forms and reports pertinent to case setup, noncooperation, and notification of continuing services. It also includes instructions for generation and distribution of each form.

Effective Date

Upon receipt.

Material Superseded

None

Additional Information

Refer questions about this general letter to your regional collections administrator.

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

July 8, 2005

GENERAL LETTER NO. 9-H-AP-2

ISSUED BY: Bureau of Collections, Division of Policy Coordination

SUBJECT: Employee's Manual, Title 9, Chapter H, *SERVING QUALIFIED CUSTOMERS APPENDIX*; Contents (page 1), revised; page 1, revised; and the following forms:

470-0188   *Application for Nonassistance Support Services,* revised
470-1981   *Request to Stop Support Services,* revised
470-3485   *Incomplete Non-Assistance Support Application*, revised

Summary

These forms have been updated to remove language indicating medical support services are optional. These services are not optional for nonpublic assistance applicants.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 9, Chapter H-Appendix, and destroy them:

Page	Date
Contents (p. 1)	May 6, 2003
470-0188	12/02
1	May 6, 2003
470-1981 (after p. 2)	4/03
470-3485 (after p. 6)	6/98

Additional Information

Refer questions about this general letter to your regional collections administrator.

STATE OF IOWA

Fields of Opportunities

June 9, 2006

GENERAL LETTER NO. 9-H-AP-3

ISSUED BY: Bureau of Collections, Division of Child Support, Case Management, and Refugee Services

SUBJECT: Employees' Manual, Title 9, Chapter H, Appendix, ***SERVING QUALIFIED CUSTOMERS APPENDIX***, pages 1 and 2, revised; and the following form:

        470-1981   *Request to Stop Support Services*, revised

Summary

This chapter is revised to:

♦ Change the language of the instructions for form 470-1981, *Request to Stop Support Services*, to include information on the insert, *Notice of Continued Services*.

♦ Clarify the language of form 470-1981, *Request to Stop Support Services*. The form now indicates that when a payee asks us to stop services, we will continue enforcement as long as support is due the state.

♦ Adds to the form an inserted page titled *Notice of Continued Services*, which provides payees with information on services and fees.

Effective Date

Upon receipt.

Material Superseded

Remove the following page and form from Employees' Manual, Title 9, Chapter H, Appendix, and destroy them:

Page	Date
1	July 8, 2005
2	May 6, 2003
470-1981	7/03

Additional Information

Refer questions about this general letter to your regional collections administrator.